https://dmas.virginia.gov

### **MEDICAID BULLETIN**

# Eligibility of Pregnant Individuals at the End of their Postpartum Period

Last Updated: 03/09/2022



Suite 1300 Richmond, VA 23219

### **MEDICAID BULLETIN**

## Eligibility of Pregnant Individuals at the End of their Postpartum Period

The purpose of this bulletin is to serve as a reminder to providers delivering prenatal and postpartum care services to individuals of eligibility rules surrounding the end of the postpartum period for pregnant individuals. Most pregnant individuals are re-evaluated at the end of the 60-day postpartum period. Please see the below guidance for special processes during the COVID health emergency period.

#### During the COVID-19 Public Health Emergency (PHE):

- Most members enrolled in Medicaid for Pregnant Women and postpartum members enrolled in non-pregnancy related coverage are protected by the COVID-19 Federal (PHE) Maintenance of Effort and will not have benefits reduced or terminated unless they are reported deceased, move permanently from the state, or request closure of their benefits.
- Members enrolled in FAMIS MOMS, FAMIS Prenatal Care, or CHIPRA-214 individuals enrolled in Medicaid for Pregnant Women are re-evaluated at the end of their 60-day postpartum period for eligibility in other coverage groups and enrolled in ongoing eligibility or closed if no longer eligible as this population is not protected by the Maintenance of Effort.

#### Post COVID-19 PHE:

• After the end of the COVID-19 Public Health Emergency, <u>all</u> members must have their eligibility reviewed before reduction or closure of benefits. When individuals are found eligible for ongoing coverage, they are moved to a new coverage group with no break in eligibility.

When members have their eligibility reviewed, they may remain eligible for full or limited coverage. Individuals who have provided all information necessary to review their eligibility and are not enrolled in Medicare who are found ineligible for full coverage are referred to the Federal Marketplace to be evaluated for a Qualified Health Plan or Advanced Premium Tax Credits. Thank you for continuing postpartum care to these individuals and all of Virginia's members.



Department of Medical Assistance Services 600 East Broad Street Suite 1300 Richmond, VA 23219

Aetna Better Health of Virginia

Anthem HealthKeepers Plus

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PROVIDER CONTACT INFORMATION & RESOURCES		
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Virginia Medicaid Web Portal		
Automated Response System (ARS)		
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Member eligibility, claims status,	www.virginiamedicaid.dmas.virginia.gov	
payment status, service limits,		
service authorization status, and		
remittance advice.		
Medicall (Audio Response		
System)		
Member eligibility, claims status,	1-800-884-9730 or 1-800-772-9996	
payment status, service limits,		
service authorization status, and		
remittance advice.		
KEPRO		
Service authorization information	https://dmas.kepro.com/	
for fee-for-service members.		
Provider Appeals		
DMAS launched an appeals portal in		
2021. You can use this portal to file		
appeals and track the status of your	https://www.dmas.virginia.gov/appeals/	
appeals. Visit the website listed for		
appeal resources and to register for		
the portal.		
Managed Care Programs		
Medallion 4.0, Commonwealth Coordinated Care Plus (CCC Plus), and Program of All-		
Inclusive Care for the Elderly (PACE). In order to be reimbursed for services provided to a		
managed care enrolled individual, providers must follow their respective contract with the		
managed care plan/PACE provider. The managed care plan may utilize different guidelines		
than those described for Medicaid fee		
	http://www.dmas.virginia.gov/#/med4	
CCC Plus	http://www.dmas.virginia.gov/#/cccplus	
PACE	http://www.dmas.virginia.gov/#/longtermprograms	
Magellan Behavioral Health	www.MagellanHealth.com/Provider	
Behavioral Health Services	For credentialing and behavioral health service	
Administrator, check eligibility,	information, visit:	
claim status, service limits, and	www.magellanofvirginia.com, email:	
service authorizations for fee-for-	VAProviderQuestions@MagellanHealth.com,or	
service members.	Call: 1-800-424-4046	
Provider HELPLINE		
Monday-Friday 8:00 a.m5:00 p.m.	1 004 706 6272	
For provider use only, have	1-804-786-6273	
Medicaid Provider ID Number	1-800-552-8627	
available.		
A . D IT 1.1 CT7:		

www.aetnabetterhealth.com/Virginia

www.anthem.com/vamedicaid

1-800-279-1878

1-800-901-0020

https://dmas.virginia.gov

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Magellan Complete Care of Virginia	www.MCCofVA.com
	1-800-424-4518 (TTY 711) or 1-800-643-2273
Optima Family Care	1-800-881-2166 <u>www.optimahealth.com/medicaid</u>
United Healthcare	www.Uhccommunityplan.com/VA
	and www.myuhc.com/communityplan
	1-844-752-9434, TTY 711
Virginia Premier	1-800-727-7536 (TTY: 711), <u>www.virginiapremier.com</u>